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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Ross, Dennis, Alan, ,		
(b) Address (number and street) 607 Lake Miriam Dr		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Lakeland FL 33813		2. Candidate's FEC Identification Number H0FL12101
4. Party Affiliation REPUBLICAN PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate FL 15	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends of Dennis Ross		
(b) Address (number and street) Post Office Box 7310		
(c) City, State, and ZIP Code Lakeland FL 33807		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Insuring Our Future		
(b) Address (number and street) 824 South Milledge Avenue		
(c) City, State, and ZIP Code Athens GA 30605		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Ross, Dennis, Alan, , [Electronically Filed]	Date 04/28/2017
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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